

PART B - FEE(S) TRANSMITTAL

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7590 07/28/2003

DENTON L. ANDERSON
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 PASADENA, CA 91101

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Norman Anderson	(Depositor's name)
<i>Norman Anderson</i>	(Signature)
9-29-03	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/833,903	04/12/2001	Georges Baikoff	32774-PCT-USA - 065268.01	4734

TITLE OF INVENTION: SCLERAL EXPANSION SEGMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	10/28/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILLSE, DAVID H	3738	623-004100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Denton L. Anderson
 Sheldon & Mak

2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

O.I.I. INTERNATIONAL, INC.

Ontario, California

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

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4b. Payment of Fee(s):

Issue Fee

A check in the amount of the fee(s) is enclosed.

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Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signature) *Denton L. Anderson* (Date) *9-29-03*
 Denton L. Anderson, 30, 153

10/09/2003 MBELETE2 00000014 09833903

01 FC:1501	1300.00	OP
02 FC:1504	300.00	OP
03 FC:8001	30.00	OP

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